PHA 5-Year and Annual Plan

U.S. Department of Housing and Urban Development Office of Public and Indian Housing

OMB No. 2577-0226 Expires 4/30/2011

1.0	PHA Information						
1.0	PHA Name: Livonia Housing Commission				PHA Code: MI055		
		Performing	□s	tandard	HCV (Section 8)		
	PHA Fiscal Year Beginning: (MM/YYYY);		_		_ 、 ,		
2.0	Inventory (based on ACC units at time of F	Y beginning		HOU'aaa C	100		
1	Number of PH units:151		Number of	HCV units: 9	109		
3.0	Submission Type						
		☐ Annual	Plan Only		5-Year Plan Only		
4.0	PHA Consortia	HA Consorti	ia: (Check box if su	bmitting a joi	nt Plan and complete table bel	ow.)	
<u> </u>			1		<u> </u>	No. of Unit	e in Each
	Participating PHAs	PHA	Program(s) Incl	uded in the	Programs Not in the	Program	3 III Lacii
	Tuntospuning FIII is	Code	Consortia		Consortia	PH	HCV
	PHA 1:					1	
	PHA 2:						
	PHA 3:						
5.0	5-Year Plan. Complete items 5.1 and 5.2 on	ly at 5-Year	Plan update.				
5.1	Mission. State the PHA's Mission for serving						
	jurisdiction for the next five years: The missicassistance, and to expand and preserve decer						
	committed to providing quality services to ou					Journission is,	juriner
	committee to promiting quality services to ou	o chomb m c	т сусстве, супсте	i una respect	an manner.		
					•		
5.2	Goals and Objectives. Identify the PHA's q	uantifiable g	goals and objectives	that will ena	ble the PHA to serve the needs	of low-income	e and very
	low-income, and extremely low-income fami	lies for the n	next five years. Incl	ude a report o	on the progress the PHA has m	ade in meeting	the goals
	and objectives described in the previous 5-Ye						
	GOAL #14 Achieve and maintain at a minimum		.d	hille Henri	A A A A A A A A A A A A A A A A A A A	مثادم فالدادم	0
	GOAL #1: Achieve and maintain at a minimum Management System (SEMAP): The Livonia						
	and Section 8 Voucher programs as of 12/31/		mmussion nas açnic	vea ana man	uamea a nign perjormer siaius	s jor me ruvuc	nousing
	GOAL #2: Improve the physical environment		Iousing. <i>The Public</i>	Housing pro	perties currently have a physic	al inspection s	core greater
ľ	than 90% based on HUD REAC physical insp						
	GOAL #3: Expand the supply of affordable h	ousing for fa	amilies, elderly and	disabled. The	e Housing Commission particip	oated in the sec	tion 8 Opt-
	out initiative and has increased the supply of						
	GOAL #4: The Housing Commission shall ex						
	Commission remains financially viable and d					he public housi	ing and
ŀ	section 8 voucher and new construction programmed GOAL #5: Establish a Homeownership Programmed Forces					ahı in thia îniti	ativa
	Currently, the Commission is acquiring forec						
	for re-sale in 2010. The Commission will also						
	housing homes.	-					•
	GOAL #6: Extend the Public Housing Design						
.	extension to the Designated Housing Plan. Th	ie current pl	an expires Decemb	er 17, 2009 a	nd the Commission intends to r	request an addi	itional two
	year extension.						
	PHA Plan Update						
6.0	-						
0.0	(a) Identify all PHA Plan elements that have	been revised	d by the PHA since	its last Annu	al Plan submission: Section 8 .	Administrative	Plan
	(b) Identify the specific location(s) where the		obtain copies of the	5-Year and	Annual PHA Plan. For a comp	olete list of PH	A Plan
ļ	elements, see Section 6.0 of the instruction	ns.					
	Livonia Housing Commission						
	19300 Purlingbrook Livonia, Mi. 48152						ļ
	1110mit, 191. 70102						. 1
	Hope VI, Mixed Finance Modernization or	Develonme	nt. Demolition and	l/or Dienosit	ion. Conversion of Public Ho	using, Homeo	wnershin
7.0	Programs, and Project-based Vouchers. In						,
	•			4 0			
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8.0	Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable. Please see capital fund obligation/expenditure statements for the 2006, 2007, 2008, 2009, 2009 ARRA and 2010 capital fund grants. Also attached are the 2010-2014 five year capital funds.
8.1	Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the Capital Fund Program Annual Statement/Performance and Evaluation Report, form HUD-50075.1, for each current and open CFP grant and CFFP financing. Please see obligation and expenditure reports for all open Capital Fund grants.
8.2	Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the Capital Fund Program Five-Year Action Plan, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan. Please see enclosure
8.3	Capital Fund Financing Program (CFFP). Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements. CFFP Fannie Mae Loan closed in 2007 in the amount of \$615,726.39. Expenditure deadline is June 2011.
9.0	Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location. The Livonia Housing Commission administers the City of Livonia Community Development Block Grant (CDBG) program and prepares the Consolidated Plan for approval by HUD. The current CDBG Consolidated Plan is for the period 2005 through 2010 and the housing needs and strategies to address those needs are attached to this Agency Plan. See pages 40-68 of the Consolidated Plan for housing needs/strategies.

Strategy for Addressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. See above narrative in Section 9.0 as to CDBG Consolidated Plan citation.
Additional Information. Describe the following, as well as any additional information HUD has requested.
(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan. Please see section5.2 as to progress in meeting goals.
(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"
To be submitted only with 5-year plan. "Substantial deviations or significant amendments or modifications are defined as discretionary changes in the plans or policies of the Housing Commission that fundamentally change the mission, goals, objectives or plans of the agency and which require formal approval of the Board of Commissioners."
(c) Please see attachment relative to the Violence Against Women Act (VAWA)

- (d) Please be advised the Commission conducted a public hearing on September 29, 2009 and there were no comments from the general public or residents of Public Housing on the Annual and Five Year Agency Plan Further ,the Resident Advisory Board offered no additional recommendations on the proposed Annual 2010 Agency Plan and Five-Year Plan 2010-2014
- 11.0 Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.
 - (a) Form HUD-50077, PHA Certifications of Compliance with the PHA Plans and Related Regulations (which includes all certifications relating to Civil Rights)
 - (b) Form HUD-50070, Certification for a Drug-Free Workplace (PHAs receiving CFP grants only)
 - (c) Form HUD-50071, Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only)
 - (d) Form SF-LLL, Disclosure of Lobbying Activities (PHAs receiving CFP grants only)
 - (c) Form SF-LLL-A, Disclosure of Lobbying Activities Continuation Sheet (PHAs receiving CFP grants only)
 - (f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.
 - (g) Challenged Elements
 - (h) Form HUD-50075.1, Capital Fund Program Annual Statement/Performance and Evaluation Report (PHAs receiving CFP grants only)
 - (i) Form HUD-50075.2, Capital Fund Program Five-Year Action Plan (PHAs receiving CFP grants only)

ATTACHMENT #9

VIOLENCE AGAINST WOMEN ACT (VAWA)

The VAWA statute and Federal Register dated March 16, 2007 entitled "The Violence Against Women and Department of Justice Reauthorization Act of 2005: Applicability to HUD Programs, page 12697 A., "Public Housing Agency Plans" stipulates that the PHA include in the annual plan a description as activities, services or programs to be offered by an agency, either directly or in partnership with other service providers towards child or adult victims of domestic violence, dating violence, sexual assault or stalking.

The Livonia Housing Commission administers the HUD Community Development Block Grant (CDBG) program. Through the Public Service initiative the Commission entered into a contract (\$4,750.00) dated July 1, 2007 with FIRST STEP, the Western Wayne County Project on Domestic Assault to provide victim assistance to low income Livonia residents including residents of Public Housing and the Voucher Housing Assistance Program. FIRST STEP based on previous contracts will be able to assist approximately 50 low income families. Services and programs include:

- A) 24 hour crisis line for all Livonia residents;
- B) Counseling aimed at investigating and solving immediate problems and locating available options. Support group assistance is also provided.
- C) Referral, advocacy in the areas of legal and financial problems, permanent housing assistance, childcare and transportation.
- D) Educational presentations to high schools, community groups and public housing families regarding prevention and options provided through a Speakers Bureau.

The FIRST STEP organization will be a valuable partner in providing services and counseling to Housing Commission clients.

JAMES M. INGLIS Executive Director

						Expires 4/30/2011
Part I: Summary	ummary		. Trippelinates			**************************************
PHA Name:	e:	Grant Type and Number				FFY of Grant: 2006
Livonia Ho	Livonia Housing Commission	Capital Fund Program Grant No: MI28P05550106 Replacement Housing Factor Grant No: Date of CFFP:	50106			rr x of Grant Approvat:
Type of Grant Original A	oe of Grant Original Annual Statement	Reserve for Disasters/Emergencies		☐ Revised Annual Statement (revision no:	sion no:	
Line	Summary by Development Account	Line Summary by Development Account	Tota	Final Performance and Evaluation Report		J. A. T. C. T. L. T.
				Posicod ²		Total Actual Cost
1	Total non-CFP Funds	- Palanta - Pala	Citguat	Nevised	Congared	Expended
2	1406 Operations (may not exceed 20% of line 21) 3	eed 20% of line 21) 3	0	0	0	0
Ç	1408 Management Improvements	ents				
4	1410 Administration (may not exceed 10% of line 21)	exceed 10% of line 21)				The state of the s
5	1411 Audit	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
6	1415 Liquidated Damages	Transaction to the second seco				
7	1430 Fees and Costs	Prince of the Control	0	610.88	56.315.00	58.183.56
	1440 Site Acquisition		- make			
9	1450 Site Improvement	Topic Control				And the second s
10	1460 Dwelling Structures	111000000000000000000000000000000000000	50,361.00	50,361.00	0	0
11	1465.1 Dwelling Equipment—Nonexpendable	-Nonexpendable	15,000.00	15,000.00	15,665.00	15,665.00
12	1470 Non-dwelling Structures		15,000.00	15,000.00	0	0
13	1475 Non-dwelling Equipment	it .	40,000.00	40,000.00	48,991.88	0
14	1485 Demolition					
15	1492 Moving to Work Demonstration	stration				
16	1495.1 Relocation Costs	And the second s				
17	1499 Development Activities +				i con i communication de la communication de l	
	The second secon					

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Capital Fund Financing Program Capital Fund Program, Capital Fund Program Replacement Housing Factor and Annual Statement/Performance and Evaluation Report

Part I: Summary	mary				Expires 4/30/2011
PHA Name: Livonia Housing Commission	Grant Type and Number Capital Fund Program Grant No: MI28P055500106 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant:2006 FFY of Grant Approval:	
Type of Grant	(
Original	Original Annual Statement Reserve for Disasters/Emergencies	zencies .	□ Revi	Revised Annual Statement (revision no:	<u> </u>
M Performa	Performance and Evaluation Report for Period Ending: 9/30/2009			Final Performance and Evaluation Report	Report
Line S	Summary by Development Account	Tota	Total Estimated Cost		Total Actual Cost
		Original	Revised ²	Obligated	
18a 1	1501 Collateralization or Debt Service paid by the PHA				
18ba 90	9000 Collateralization or Debt Service paid Via System of Direct Payment	53,300.00	52,689.12	52,689.12	52,689.12
19 15	1502 Contingency (may not exceed 8% of line 20)				
20 A:	Amount of Annual Grant: (sum of lines 2 - 19)	173,661.00	173,661.00	173,661.00	140,159.68
21 A	Amount of line 20 Related to LBP Activities				
22 A	Amount of line 20 Related to Section 504 Activities				
23 A	Amount of line 20 Related to Security - Soft Costs				
24 A	Amount of line 20 Related to Security - Hard Costs				
25 A	Amount of line 20 Related to Energy Conservation Measures				
Signature o	Signature of Executive Director	Date (0-15-09 Sig	Signature of Public Housing Director	sing Director	

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								PHA Wide	PHA Wide		MI 55-2	MI 55-1 & 2	MI 55-1 & 2	MI 55-1		Development Number Name/PHA-Wide Activities		1 1171 Name. 14 voma 110 mang Commission	Part II: Supporting Pages
- TATALON BERTALINA DE LA CANADA DEL CANADA DE LA CANADA DEL CANADA DE LA CANADA DEL CANADA DE LA CANADA DEL CANADA DEL CANADA DE LA CA			T T T T T T T T T T T T T T T T T T T	THE PROPERTY OF THE PROPERTY O	THE OWNER AND ADDRESS OF THE OWNER AND ADDRESS		Total	Program Program	Fees/Costs A&E	carpeting	Replace common area and apartment	Replace fire system booster pumps and upgrade fire alarm system	Purchase of refrigerators, ranges, air conditioners	Construct Canopy Extension to Patio		General Description of Major Work Categories			
																	Replaceme	Capital Fund Pro CFFP (Yes/ No):	Tun
								9000	1430		1460	1475	1465.1	1470		Development Account No.	Replacement Housing Factor Grant No:	Capital Fund Program Grant No: MI28P05550106 CFFP (Yes/No):	
							:	lump sum	lump sum		mus danıl	4	40	H		Quantity	ant No:	: MI28P055501	
							173,661.00	53,300	610.88		50,361.00	40,000.00	15,000.00	15,000.00	Original	Total Estimated Cost		06	
							173,661.00	52,689.12	56,315.00		50,361.00	40,000.00	15,000.00	15,610.87	Revised 1	ted Cost		Pouchair	Eadamal E
							173,661.00	52,689.12	56,315.00		0	48,991.88	15,665.00	0	Funds Obligated ²	Total Actual Cost		r such at Ex. F. of At attr. 7000	EV of C
							140,159.68	52,689.12	58,183.56		0	13,622.00	15,665.00	0	Funds Expended ²	Cost		Š	nk
						:		final per loan	on going		planning	on going	complete	planning		Status of Work	,		

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program PHA Name: Livonia Housing Commission	dule for Capital Fund Commission	Financing Program		Account to the second s	Federal FFY of Grant: 2006
Development Number Name/PHA-Wide Activities	All Fund (Quarter F	All Fund Obligated (Quarter Ending Date)	All Fund (Quarter F	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PHA Wide	09/30/2008	07/31/2008	09/30/2010		THE ADMINISTRATION OF THE PROPERTY OF THE PROP
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Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

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Office of Public and Indian Housing
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Expires 4/30/2011

Part I: Summary	umary	7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 -			•
PHA Name: Livonia Hou	PHA Name: Grant Type and Number Capital Fund Program Grant No: MI28P055501072007 Replacement Housing Factor Grant No: Date of CFFP:	35501072007		· ·	FFY of Grant 2007 FFY of Grant Approval:
Type of Grant ☐ Original A ☐ Performan	Type of Grant ☐ Reserve for Disasters/Emergencies ☐ Performance and Evaluation Report for Period Ending: 9/30/2009		☐ Revised Annual Statement (revision no: ☐ Final Performance and Evaluation Report	t (revision no:) d Evaluation Report	The state of the s
Line	Summary by Development Account	Tot	Total Estimated Cost		Total Actual Cost 1
		Original	Revised ²	Obligated	Expended
	Total non-CFP Funds		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements			14 - 11 THE PARTY OF THE PARTY	
4	1410 Administration (may not exceed 10% of line 21)				
2	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	20,000.00		20,000.00	32,958.00
8	1440 Site Acquisition	T THE PERSON NAMED IN COLUMN N	1 1111111111111111111111111111111111111		
9	1450 Site Improvement	TO THE STATE OF TH			
10	1460 Dwelling Structures	96,046.88		96,046.88	40,000.00
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration	,	The second secon		
16	1495.1 Relocation Costs				And a second sec
17	1499 Development Activities 4				

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² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
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⁴ RHF funds shall be included here.

Capital Fund Financing Program Capital Fund Program, Capital Fund Program Replacement Housing Factor and Annual Statement/Performance and Evaluation Report

	Signatur	25	24	23	13	21	20	19	18ba	18a		Line	Perfo	Origi	Type of Grant	Part I: Summary PHA Name: Livonia Housing Commission
Jun 19 3/15 10-15-07	70	Amount of line 20 Related to Energy Conservation Measures	Amount of line 20 Related to Security - Hard Costs	Amount of line 20 Related to Security - Soft Costs	Amount of line 20 Related to Section 504 Activities	Amount of line 20 Related to LBP Activities	Amount of Annual Grant: (sum of lines 2 - 19)	1502 Contingency (may not exceed 8% of line 20)	9000 Collateralization or Debt Service paid Via System of Direct Payment .	1501 Collateralization or Debt Service paid by the PHA		Summary by Development Account	Performance and Evaluation Report for Period Ending: 9/30/2009	Original Annual Statement Reserve for Disasters/Emergencies	rant	ummary c: Grant Type and Number on Capital Fund Program Grant No: MI28P05550107 Replacement Housing Factor Grant No: Date of CFFP:
							168,736.00		52,689.12		Original	Total Estimated Cost		ncies		
	Signature of Public Housing Director										Revised ²	ated Cost		☐ Revise		2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
	ng Director						168,736.00		52,689.12		Obligated	Total	Final Performance and Evaluation Report	Revised Annual Statement (revision no:		FFY of Grant:2007 FFY of Grant Approval:
	Date						112,474.84		39,516.84		Expended	Total Actual Cost 1)FT			

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Part II: Supporting Pages	\$,			***************************************			
PHA Name: Livonia Housing Commission		Grant Type and Number Capital Fund Program Grant No: MI28P05550107 CFFP (Yes/ No): Replacement Housing Factor Grant No:	.: MI28P0555010	07	Federal F	Federal FFY of Grant: 2007	07	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost	ed Cost	Total Actual Cost	ost	Status of Work
				Original	Revised 1	Funds Obligated ²	Funds Expended ²	
MI 55-1 & 2	Consulting & Architectural and Engineering Fees	1430	1	20,000.00		20,000.00	32,958.00	on going
MI 55-1	Remove and replace existing apartment bathroom vanitites, faucets and shower enclosures and install new.	1460	54	40,000.00	,	40,000.00	40,000.00	on going
MI 55-2	Apartment and common area carpeting and painting	1460	2	56,047.88		56,047.88	0	planning
PHA Wide	Debt Service Capital Fund Financing Program	9000	lump sum	52,689.12		52,689.12	39,516.84	final per loan closing
	Total			168,736.00		168,736.00	112,474.84	
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¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program	dule for Capital Fund	Financing Program			
PHA Name: Livonia Housing Commission	Commission		•		Federal FFY of Grant: 2007
Development Number Name/PHA-Wide Activities	All Fund (Quarter E	All Fund Obligated (Quarter Ending Date)	All Fund (Quarter F	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PHA Wide	9/30/2009		09/30/2011		
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mmission	P05550108			FFY of Grant Approval:
Type of Grant ☐ Reserve for Disasters/Emergencies ☐ Original Annual Statement ☐ Reserve for Disasters/Emergencies ☑ Performance and Evaluation Report for Period Ending: 9/30/2009		Revised Annual Stateme	nt (revision no: nd Evaluation Report)
Summary by Development Account	THE THE PARTY MANAGEMENT AND ADDRESS OF THE PARTY ADDRESS OF THE PARTY AND ADDRESS OF THE PARTY	Total Estimated Cost		Total Actual Cost 1
	Original	Revised ²	Obligated	Expended
Total non-CFP Funds				
1406 Operations (may not exceed 20% of line 21) 3	25,405.88		0	0
1408 Management Improvements				
1410 Administration (may not exceed 10% of line 21)				
1411 Audit		-		
1415 Liquidated Damages				
1430 Fees and Costs	0		0	0
1440 Site Acquisition	77777			The state of the s
1450 Site Improvement		THE THE PARTY OF T		
1460 Dwelling Structures	75,000.00	TOTOTOTO AND A SALAR A	0	0
1465.1 Dwelling Equipment—Nonexpendable	TOTOTO MARKET LIBERTY AND ALLEY AND	The state of the s		
1470 Non-dwelling Structures	25,000.00	W	8,669.00	8,669.00
1475 Non-dwelling Equipment		· · · · · · · · · · · · · · · · · · ·		
1485 Demolition				
1492 Moving to Work Demonstration	1 7 7 11 11 11 11 11 11 11 11 11 11 11 1			
1495.1 Relocation Costs				1 000 000
1499 Development Activities *				The state of the s
	ion Report for leading ands may not excee Improvement on (may not work) barnages sis sis ion for leading and ment uctures g Structures	Grant Type and Number Capital Fund Program Grant No: MI28P0555 Replacement Housing Factor Grant No: Date of CFFP: The control of CF	Grant Type and Number Capital Fund Program Grant No: MI28P05550108 Replacement Housing Factor Grant No: Date of CFFP: Date of CFFP: Date	Grant Type and Number Capital Fund Program Grant No. NID8P05550108 Replacement Housing Factor Grant No. Revised Annual Statement (revision to Report for Period Ending: 9/30/2009 Total Estimated Cost Final Performance and Evaluat elopment Account Revised 20% of line 21) Original Revised Cost Revised 20% of line 21) Revised 20% of lin

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Capital Fund Financing Program Capital Fund Program, Capital Fund Program Replacement Housing Factor and Annual Statement/Performance and Evaluation Report

Part I: Summary	ummary					
PHA Name: Livonia Housing Commission	c: Grant Type and Number ousing Capital Fund Program Grant No: MI28P05550108 Replacement Housing Factor Grant No: Date of CFFP:			FFY of C	FFY of Grant:2008 FFY of Grant Approval:	
Type of Grant	rant					
Origi	Original Annual Statement Reserve for Disasters/Emergencies	ncies		Revised Ann	Revised Annual Statement (revision no:	•
Perfo	Performance and Evaluation Report for Period Ending: 9/30/2009			☐ Final Per	Final Performance and Evaluation Report	7
Line	Summary by Development Account	ı.	Total Estimated Cost		Total /	Total Actual Cost '
		Original	Revised ²	d²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA					
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment	52,689.12			52,689.12	0
19	1502 Contingency (may not exceed 8% of line 20)					
20	Amount of Annual Grant: (sum of lines 2 - 19)	178,095.00			61,358.12	8,669.00
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 20 Related to Section 504 Activities					
23	Amount of line 20 Related to Security - Soft Costs					
24	Amount of line 20 Related to Security - Hard Costs					
25	Amount of line 20 Related to Energy Conservation Measures					
Signatur	Signature of Executive Director	Date / (5_09)	Signature of Public F	lic Housing Director	rector	Date
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To be completed for the Performance and Evaluation Report.

To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

3					- Charles and Char						PHA Wide	5 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 -	MI 55-2	MI 55-2	MI 55-1 & 2	MI 55-1 & 2		Development Number Name/PHA-Wide Activities			PHA Name: Livonia Housing Commission	Part II: Supporting Pages
	The state of the s	No. of Control of Cont		Table of the latest and the latest a	11. T.				Total		Debt Service - Capital Fund Financing Program	garage/suction	Roof repairs and vinyl siding on storage	Kemove and replace central mailbox collector	Apartment and common area painting	Operations		General Description of Major Work Categories	I N	CI		
		The second secon		Transmitten and the second				•			ng 9000		rage 1470	1470	VQ	1406		Account No.	chiaconton monanta ación	Capital Fund Program Grant No: ML28F05550108 CFFP (Yes/No); Real accoment Housing Factor Grant No:	Grant Type and Number	
								WHO ARE A SECOND ASSESSMENT ASSES			lump sum	•	,)	135	ı		Quantity	Jan Ivo.	o: MIZSPUSSSUI		
								1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	178.095.00		52,689.12		15,000.00	10,000.00	75,000.00	25,405.88	Original	Total Estimat		S	20	
										٠							Revised 1	Estimated Cost			Federal F	
								3	61.358.12		52,689.12		8,669.00	0	0	0	Funds Obligated ²	Total Actual Cost			Federal FFY of Grant: 2008	
								7 - 7	8.669.00		0		8,669.00	0	0	0	Funds Expended ²	Cost)08	
										o	final per loan		completed	planning	planning	planning		Status of Work				

To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

 $^{^2\,\}mathrm{To}$ be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program	edule for Capital Fund	Financing Program			T THE PROPERTY OF THE PROPERTY
PHA Name: Livonia Housing Commission	Commission				Federal FFY of Grant: 2008
Development Number Name/PHA-Wide Activities	All Fund (Quarter E	All Fund Obligated (Quarter Ending Date)	All Fund (Quarter F	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PHA Wide	6/13/2010		6/13/2012		none
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Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Capital Fund Financing Program Capital Fund Program, Capital Fund Program Replacement Housing Factor and Annual Statement/Performance and Evaluation Report

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226

Expires 4/30/2011

Part I: Su PHA Name: Livonia Hou	Part 1: Summary PHA Name: Capital Fund Program Grant No: MI28P05550109 Replacement Housing Factor Grant No: Date of CFFP:	05550109			
J	Type of Grant ☐ Original Annual Statement ☐ Reserve for Disasters/Emergencies			Revised Annual S	Revised Annual Statement (revision no:
	EN TO THE THEORY OF THE PARTY O			C riman remonit	Linai Lettormance and Pathagon Vebort
Line	Summary by Development Account	October	Tota	Total Estimated Cost	
1	Total non-CFP Funds				(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
2	1406 Operations (may not exceed 20% of line 21) 3				
3	1408 Management Improvements		-		THE AMERICAN AND ADDRESS OF THE AMERICAN AND ADDRESS OF THE AMERICAN ADDRESS O
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				1,1,1,1
6	1415 Liquidated Damages				The state of the s
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	25,000.00			0
10	1460 Dwelling Structures	50,000.00	- 1		0
11	1465.1 Dwelling Equipment—Nonexpendable		- 1		and the second s
12	1470 Non-dwelling Structures		- 1		THE PROPERTY OF THE PROPERTY O
13	1475 Non-dwelling Equipment	52,310.88	- {		0
14	1485 Demolition				To the second se
15	1492 Moving to Work Demonstration			7	ALLES TO THE PROPERTY OF THE P
16	1495.1 Relocation Costs		- 1		ADDITIONAL TO THE PROPERTY OF
17	1499 Development Activities *				

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
⁴

⁴ RHF funds shall be included here.

Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program Annual Statement/Performance and Evaluation Report

Signatur	25	24	23	22	21	20	19	18ba	182		Line	Perfor	Origin	Type of Grant	PHA Name: Livonia Housing Commission	Part I: Summary
Signature of Executive Director D Common M I	Amount of line 20 Related to Energy Conservation Measures	Amount of line 20 Related to Security - Hard Costs	Amount of line 20 Related to Security - Soft Costs	Amount of line 20 Related to Section 504 Activities	Amount of line 20 Related to LBP Activities	Amount of Annual Grant: (sum of lines 2 - 19)	1502 Contingency (may not exceed 8% of line 20)	9000 Collateralization or Debt Service paid Via System of Direct Payment	1501 Collateralization or Debt Service paid by the PHA		Summary by Development Account	Performance and Evaluation Report for Period Ending: 9/30/2009	Original Annual Statement Reserve for Disasters/Emergencies	ant	using Capital Fund Program Grant No: MI28P05550109 Replacement Housing Factor Grant No: Date of CFFP:	mmary
Date 10-15-09						180,000.00			52,689.12	Original	H		gencies			
Signature of Publ		ı									Total Estimated Cost					
of Public Housir										Revised ²	d Cost	□ Fin	Revised		FE	
ic Housing Director						0			0			al Performance	d Annual Staten		FFY of Grant:2009 FFY of Grant Approval:	
						:				Obligated	Tot	Final Performance and Evaluation Report	Revised Annual Statement (revision no:		roval:	
Date						0			0	Expended	Total Actual Cost	port	_			
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¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

					unament of the state of the sta			111111111111111111111111111111111111111					PHA Wide	MI 55-1 & 2	MI 55-1 & 2	MI 55-1 & 2	MI 55-1 & 2	The second secon	Development Number Name/PHA-Wide Activities		PHA Name: Livonia Housing Commission	Part II: Supporting Pages
- Transaction -		The state of the s			TOTAL COLUMN TO THE COLUMN TO		The state of the s	THE PERSON NAMED IN COLUMN NAM	THE PARTY OF THE P	Total	111	Program	Debt Service Capital Fund Financino	Hallway lighting	Security camera upgrade/replacement	Cycle paint apartments in 55-1, paint hallways and stairwell in 55-2	Replace fencing around property		General Description of Major Work Categories	ਸ਼		
	7.772				THE COLUMN TWO IS NOT									1475	ent 1475	nt 1460	1450		Vork Development Account No.	Replacement Housing Factor Grant No:	Grant Type and Number Capital Fund Program Grant No: P05550109	
												amp oun	lump sum	lump sum	mus danıl	lump sum	mus dann	1000	Quantity	r Grant No:	t No: P05550109	
					-					180,000.00		72,007.12	52 680 12	32,310.88	20,000.00	50,000.00	25,000.00		Total Estimated Cost			T
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					700					0		:	O ,	0	0	0	0	Funds Obligated ²	Total Actual Cost		Federal FFY of Grant: 2009	
										0		c	0 (0	0	0	0	Funds Expended ²	Cost		009	
				- White								closing	final ner loan	planning	planning	planning	planning		Status of Work			

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Schedule for Capital Fund Financing Program	edule for Capital Fund	Financing Program			
PHA Name: Livonia Housing Commission	; Commission				Federal FFY of Grant: 2009
Development Number Name/PHA-Wide Activities	All Fund (Quarter E	All Fund Obligated (Quarter Ending Date)	All Fund (Quarter F	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	·
PHA Wide	9/30/2011		9/30/2013		

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¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program Annual Statement/Performance and Evaluation Report

Part I:	Part I: Summary				•
PHA Name: Livonia Hou	PHA Name: Livonia Housing Commission Capital Fund Program Grant No: MIZ8P05550110 Replacement Housing Factor Grant No: Date of CFFP:	lo:			FFY of Grant: 2010 FFY of Grant Approval:
∏ype of D Original	Type of Grant ☐ Reserve for Disasters/Emergencies ☐ Performance and Evaluation Report for Period Endine:		Revised Annual Statement (revision no:	on no:	
Line	Summary by Development Account	Total	Total Estimated Cost		Fotal Actual Cost 1
	A CONTRACTOR OF THE PROPERTY O	Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) 3	-			
3	1,408 Management Improvements	TT TTTTTY OF STREET ALL ALL ALL ALL ALL ALL ALL ALL ALL AL	THE		
4	1410 Administration (may not exceed 10% of line 21)				and the second s
5	1411 Audit				
6	1415 Liquidated Damages	· · · · · · · · · · · · · · · · · · ·			
7	1430 Fees and Costs	5,000.00		0	0
8	1440 Site Acquisition				
9	1450 Site Improvement	77,310.88	TO THE PROPERTY OF THE PROPERT	0	0
10	1460 Dwelling Structures	40,000.00	TO THE PROPERTY OF THE PARTY OF		
11	1465.1 Dwelling Equipment—Nonexpendable			-	
12	1470 Non-dwelling Structures			4.,	
13	1475 Non-dwelling Equipment	· THE PROPERTY AND ADDRESS.			
14	1485 Demolition				
15	1492 Moving to Work Demonstration		***************************************		
16	1495.1 Relocation Costs				
17	1499 Development Activities				

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Capital Fund Financing Program Capital Fund Program, Capital Fund Program Replacement Housing Factor and Annual Statement/Performance and Evaluation Report

	2000
Date Signature of Pul	Signature of Executive Director
	25 Amount of line 20 Related to Energy Conservation Measures
· ·	Amount of line 20 Related to Security - Hard Costs
	23 Amount of line 20 Related to Security - Soft Costs
:	Amount of line 20 Related to Section 504 Activities
	21 Amount of line 20 Related to LBP Activities
175,000.00	20 Amount of Annual Grant: (sum of lines 2 - 19)
	19 1502 Contingency (may not exceed 8% of line 20)
52,689.12	18ba 9000 Collateralization or Debt Service paid Via System of Direct Payment
	18a 1501 Collateralization or Debt Service paid by the PHA
Original	
Total Estimated Cost	Line Summary by Development Account
	Performance and Evaluation Report for Period Ending: 9/30/2009
rs/Emergencies	Original Annual Statement Reserve for Disasters/Emergencies
	Type of Grant
	PHA Name: Livonia Housing Capital Fund Program Grant No: MI28P05550110 Replacement Housing Factor Grant No: Date of CFFP:
	Part I: Summary
Estimated C	Original

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

											PHA Wide	MI 55-1 & 2	MI 55-2	MI 55-1 & 2		Development Number Name/PHA-Wide Activities		PHA Name: Livonia Housing Commission	5 W. D
	7.77 3940914.284.4.4	in the state of th			,	Transfer of the state of the st	The second secon		and the second s	Program	Debit Service Capital Fund Financing	Fees/Costs A&E	Apartment Cycle Painting	Upgrade emergency generator		General Description of Major Work Categories			
											ing 9000	1430	1460	1450		u.	Capital Fund Prog CFFP (Yes/ No): Replacement Hou	Grant Type and Number	
	PARACAN MINISTER III II III II III II III II III II III II II III II III			:					-		0	0	0	0		Development Account No.	Capital Fund Program Grant No: M128P05550110 CFFP (Yes/ No): Replacement Housing Factor Grant No:	d Number	
											lump sum	lump sum	lump sum	2		Quantity	MI28P0555011		
											52,689.12	5,000.00	40,000.00	77,310.88	Original	Total Estima	10		
															Revised 1	Estimated Cost		Federal F	
										:	0	0	0	0	Funds Obligated ²	Total Actual Cost		Federal FFY of Grant: 2010	
											0	0	0	0	Funds' Expended ²	Cost		910	
								- Lance		closing	final per loan	planning	planning	planning		Status of Work			

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

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Part III: Implementation Schedule for Capital Fund Financing Program	dule for Capital Fund	Financing Program	THE REAL PROPERTY OF THE PROPE	***************************************	
PHA Name: Livonia Housing Commission	Commission				Federal FFY of Grant: 2010
Development Number Name/PHA-Wide Activities	All Fund (Quarter E	All Fund Obligated (Quarter Ending Date)	All Fund (Quarter F	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PHA Wide	06/2012		06/2014		
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Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Part I: S	Part I: Summary			
PHA Name: Livonia Hou	PHA Name: Livonia Housing Commission Capital Fund Program Grant No: M128S05550109 Replacement Housing Factor Grant No: Date of CFFP:	550109		FFY of Grant: 2009 FFY of Grant Approval:
Type of Grant Original A	pe of Grant Original Annual Statement Control	☐ Revis	Revised Annual Statement (revision no:)
⊠ Perfo	Performance and Evaluation Report for Period Ending: 9/30/2009		Final Performance and Evaluation Report	The second secon
Line	Summary by Development Account	Total Estimated Cost	Cost	Total Actual Cost 1
	, the contradiction of the con	Original Revised ²	sed ² Obligated	Expended
-	Total non-CFP Funds		-	
2	1406 Operations (may not exceed 20% of line 21) 3			
ψ	1408 Management Improvements			
4	1410 Administration (may not exceed 10% of line 21)			
υ	1411 Audit			
6	1415 Liquidated Damages			
7	1430 Fees and Costs			
8	1440 Site Acquisition			
9	1450 Site Improvement	45,433.00	0	0
10	1460 Dwelling Structures	150,000.00	150,000.00	00 23,108.00
11	1465.1 Dwelling Equipment—Nonexpendable			
12	1470 Non-dwelling Structures			
13	1475 Non-dwelling Equipment	30,000.00	0	0
14	1485 Demolition			
15	1492 Moving to Work Demonstration			
16	1495.1 Relocation Costs			
17	1499 Development Activities *	TO THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRES		

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program Annual Statement/Performance and Evaluation Report

							Expires 4/30/2011
Part I: Summary	nary						
PHA Name: Livonia Housing Commission	Grant Type and Number Capital Fund Program Grant No: MI28S05550109 Replacement Housing Factor Grant No: Date of CFFP:			1 1	FFY of Grant:2009 FFY of Grant Approval:	proval:	
Type of Grant							
Original A	Original Annual Statement Reserve for Disasters/Emergencies	ncies		☐ Revis	ed Annual Stater	Revised Annual Statement (revision no:	_
N Performa	Performance and Evaluation Report for Period Ending: 9/30/2009			H 🗆	inal Performance	Final Performance and Evaluation Report	4
Line Su	Summary by Development Account		Total Estimated Cost	Cost		Total A	Total Actual Cost '
		Original		Revised 2		Obligated	Expended
18a 15	1501 Collateralization or Debt Service paid by the PHA						
18ba 90	9000 Collateralization or Debt Service paid Via System of Direct Payment						
19 15	1502 Contingency (may not exceed 8% of line 20)						
20 An	Amount of Annual Grant:: (sum of lines 2 - 19)	225,433.00			150,0	150,000.00	23,108.00
21 Ar	Amount of line 20 Related to LBP Activities						
22 Ar	Amount of line 20 Related to Section 504 Activities						
23 An	Amount of line 20 Related to Security - Soft Costs		-				
24 Au	Amount of line 20 Related to Security - Hard Costs						
25 Ar	Amount of line 20 Related to Energy Conservation Measures						
Signature of	2/		Signature of Public	Public Hous	Housing Director		Date
	Mount / Chan	0-18-0-1					

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

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U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

			THE PERSON NAMED IN COLUMN NAM						MI 55-1 & 2		7 SO Y. CO TO	MI 55-1 & 2					MI 55-1,2 & 4						MI 55-1 & 2		Activities	Name/PHA-Wide	Development Number			PHA Name: Livonia Housing Commission	Part II: Supporting Pages
- mile		1 TO		· · · · · · · · · · · · · · · · · · ·	The state of the s		Total	inspectors have sited this as a deficiency	Remove deteriorated wood site fencing		hallway security system	Install new building common area and	inspection reports.	homes. REAC inspections have cited in	at McNamara Towers & scattered site	affecting roofs & walkways . Install new	Remove and replace diseased/dead trees	accessories	towel bars, GFCI outlet and bath	repairs. Replace light fixtures, mirror,	vanities, tops, faucets, supply stops, vct	put back into project. Add bathroom	CFFP Project Improvements alternates			Categories	General Description of Major Work	Repla	CFFP		
						+		S	1450		7+17	1,475				*	s 1450						1460			Account No.	Development	Replacement Housing Factor Grant No:	CFFP (Yes/No):	Grant Type and Number Capital Fund Program Grant No. M128205550100	
									nmp sum	cameras	multiple	Amito					15						135 units			X TO S	Ouantity	rant No:		. M128S055501	
							225,433.00		30,433.00		50,000.00	30 000 00					15,000.00						150,000.00	Original R			Total Estimated Cost		``		
																								Revised 1		6	Cost			Federal F	
							150,000.00		0		C						0						150,000.00	Funds Obligated ²			Total Actual Cost			Federal FFY of Grant: 2009	
		:					23,108.00		0		c						0						23,0108.00	Funds Expended ²		6	Cost)09	
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U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226

Expires 4/30/2011

						the square of th						Development Number Name/PHA-Wide Activities	Part II: Supporting Pages PHA Name: Livonia Housing Commission
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												Vork	Grant Ty Capital Fu CFFP (Ye Replacem
												Development Account No.	Grant Type and Number Capital Fund Program Grant No: MI28S05550109 CFFP (Yes/ No): Replacement Housing Factor Grant No:
												Quantity	y: MI28S0555010
					:						Original	Total Estimated Cost	96
											Revised 1	ted Cost	Federal
											Funds Obligated ²	Total Actual Cost	Federal FFY of Grant: 2009
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										3/31/2010	Original Obligation End Date	All Fund (Quarter E	Commission	edule for Capital Fund
				 and the second s	THE PERSON NAMED IN COLUMN 1		To The Particular Street of the Particular Str	TO THE PROPERTY OF THE PROPERT			Actual Obligation End Date	All Fund Obligated (Quarter Ending Date)		Financing Program
		***************************************	7.770							3/31/2012	Original Expenditure End Date	All Fund (Quarter I		
											Actual Expenditure End Date	All Funds Expended (Quarter Ending Date)		
Lance to the state of the state												Reasons for Revised Target Dates	Federal FFY of Grant: 2009	

 $^{^2\,\}mathrm{To}$ be completed for the Performance and Evaluation Report.

Annual Statement/Performance and Evaluation Report Capital Fund Financing Program Capital Fund Program, Capital Fund Program Replacement Housing Factor and

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226

Expires 4/30/2011

PHA Name: Livonia Hou	PHA Name: Livonia Housing Commission Capital Fund Program Grant No: Replacement Housing Factor Grant No: Date of CFFP:				FFY of Grant: 2007 CFFP FFY of Grant Approval:
Type of Grant Original A Performan	nnual Statement Cand Evaluation Report for		☐ Revised Annual Statement (revision no: ☐ Final Performance and Evaluation Report	: (revision no:) Evaluation Report	
Line	Summary by Development Account	-	Total Estimated Cost		Total Actual Cost 1
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) 3				
3	1408 Management Improvements		A DESCRIPTION OF THE PROPERTY	-	The second section of the second section secti
4	1410 Administration (may not exceed 10% of line 21)				
S	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	13,793.00	19,770.46	19,770.46	19,770.46
8	1440 Site Acquisition		·	TO THE TWO PROPERTY OF THE	
9	1450 Site Improvement	30,000.00	30,000.00	25,340.00	25,000.00
10	1460 Dwelling Structures	447,000.00	447,000.00	442,170.00	130,660.30
11	1465.1 Dwelling Equipment—Nonexpendable				geographic productions of the second
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment	114,000.00	114,000.00	92,356.00	92,356.00
14	1485 Demolition			HIRLIAN PROPERTY AND A STATE OF THE STATE OF	
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities				

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Signature	25	24	23	222	21	20	19	. eq81	183			Nerform	Origina	Type of Gran	Part I: Summary PHA Name: Livonia Housing Commission
0/	Amount of line 20 Related to Energy Conservation Measures	Amount of line 20 Related to Security - Hard Costs	Amount of line 20 Related to Security - Soft Costs	Amount of line 20 Related to Section 504 Activities	Amount of line 20 Related to LBP Activities	Amount of Annual Grant: (sum of lines 2 - 19)	1502 Contingency (may not exceed 8% of line 20)	9000 Collateralization or Debt Service paid Via System of Direct Payment	1501 Collateralization or Debt Service paid by the PHA		Summary by Development Account	nance and Evaluation Report for Period Ending: 9/30/2009		nt .	nmary Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: Date of CFFP:
						660,435.00	20,694.00		34,948.00	Original	T		encies		
Signature of Pub						660,435	14,408.		35,255.	R.	otal Estimated Cost				
lic Housing						5.00	93		61	evised 2		☐ Final I	Revised A)	FFY o
Director						609,301.00	14,408.93		35,255.61	Obligated		erformance and Evaluation Re	nnual Statement (revision no:	•	FFY of Grant:2007 CFFP FFY of Grant Approval:
Date						303,042.37	0		35,255.61	Expended	Ι,	port	_	,	
	Signature of Executive Director Date Signature of Public Housing Director Date	Amount of line 20 Related to Energy Conservation Measures gnature of Executive Director Date Signature of Public Housing Director	Amount of line 20 Related to Security - Hard Costs Amount of line 20 Related to Energy Conservation Measures Date Signature of Public Housing Director	Amount of line 20 Related to Security - Soft Costs Amount of line 20 Related to Security - Hard Costs Amount of line 20 Related to Security - Hard Costs Amount of line 20 Related to Energy Conservation Measures Date Signature of Public Housing Director	Amount of line 20 Related to Security - Soft Costs Amount of line 20 Related to Security - Soft Costs Amount of line 20 Related to Security - Hard Costs Amount of line 20 Related to Security - Hard Costs Amount of line 20 Related to Energy Conservation Measures Date Signature of Public Housing Director	Amount of line 20 Related to LBP Activities Amount of line 20 Related to Section 504 Activities Amount of line 20 Related to Security - Soft Costs Amount of line 20 Related to Security - Hard Costs Amount of line 20 Related to Energy Conservation Measures Date Signature of Public Housing Director	Amount of Inie 20 Related to LBP Activities Amount of line 20 Related to Security - Soft Costs Amount of line 20 Related to Security - Hard Costs Amount of line 20 Related to Security - Hard Costs Amount of line 20 Related to Security - Hard Costs Amount of line 20 Related to Security - Hard Costs Amount of line 20 Related to Security - Hard Costs Signature of Executive Director Signature of Public Housing Director	1502 Contingency (may not exceed 8% of line 20) 20,694.00 14,408.93 14,408.93 0	na 9000 Collateralization or Debt Service paid Via System of Direct 20,694,00 14,408.93 14,408.93 0 1502 Contingency (may not exceed 8% of line 20) 20,694,00 14,408.93 14,408.93 0 Amount of Annual Grant: (sum of lines 2 - 19) 660,435.00 660,435.00 609,301.00 303,042.37 Amount of line 20 Related to LBP Activities Annount of line 20 Related to Section 504 Activities 660,435.00 609,301.00 303,042.37 Amount of line 20 Related to Security - Soft Costs Amount of line 20 Related to Security - Hard Costs Signature of Public Housing Director	1501 Collateralization or Debt Service paid by the PHA 34,948.00 35,255.61 35,255.61 35,255.61 32,255.61 32,255.61 33,255.	1501 Collateralization or Debt Service paid by the PHA 34,948.00 35,255.61 35,255.	Summary by Development Account Total Estimated Cost Actual Cost	Performance and Evaluation Report for Period Ending: 9/30/2009 Total Estimated Cost	Original Annual Statement □ Reserve for Disasters/Emergencies □ Revised Annual Statement (revisson not) Performance and Evaluation Report for Period Ending: 9/30/2009 Total Estimated Cost □ Final Performance and Evaluation not) a 1501 Collaceralization or Debt Service paid by the PHA 34,948.00 35,255.61 35,255.61 35,255.61 35,255.61 35,255.61 a 1502 Contingency (may not exceed 8% of line 20) 20,694.00 14,408.93 14,408.93 14,408.93 0 20,594.00 14,408.93 14,408.93 0 20,594.00 14,408.93 14,408.93 0 20,694.00 14,408.93 14,408.93 0 20,042.37 Amount of line 20 Related to Section 504 Activities Activities 660,435.00 660,435.00 609,301.00 303,042.37 Amount of line 20 Related to Section 504 Activities Activities Activities	pe of Grant

¹ To be completed for the Performance and Evaluation Report.

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³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

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U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

,							kitchen/hathroom plumbing	
95% complete							(countertops, cabinets)	
construction				•			(shower/tub tile/ vanities), kitchens	
under	85,660.00	110,170.00	100,000.00	100,000.00	15	1460	Renovation and upgrades to bathrooms	MI 55-4
construction		•					interior bedroom and bathroom doors	A TOTAL CONTRACTOR OF THE PARTY
under	0	75,000.00	75,000.00	75,000.00	243	1460	Remove and replace apartment entry,	MI 55-2
							and operational costs.	
							units (1993) due to excess maintenance	
							(1999) and two main roof air handler	
							Heating community room roof units	
completed	74,356.00	74,356.00	74,000.00	74,000.00	4	1475	Remove and replace two A/C and	MI 55-2
						THE PARTY OF THE P	shower enclosures/tile, paint bathrooms.	
							enclosures and install new vanities and	
construction							vanities, sinks, faucets, shower	
under	0	110,000.00	110,000.00	110,000.00	81	1460	Remove and replace existing bathroom	MI 55-2
							tanks	
							commercial domestic hot water heating	
complted	9,000.00	9,000.00	20,000.00	20,000.00	2	1475	Remove and replace two existing	MI 55-2
							currents mood.	
							maintenance and failure could result in	
							rams. Existing it will stequile excessive	
				•			tanke Evicting HW/T's require excessive	
•	•	•		`			commercial domestic hot water heating	
completed	9,000.00	9,000.00	20,000.00	20,000.00	2	1475	Remove and replace two existing	MI 55-1
							shower enclosures/tile, paint bathrooms.	
							enclosures and install new vanities and	
construction							vanities, sinks, faucets, shower	
under	0	91,000.00	91,000.00	91,000.00	51	1460	Remove and replace existing bathroom	MI 55-1
completed	19,770.46	19,770.46	19,770.46	13,793.00		1430	CFFP Fees/Costs	PHA Wide
	Funds Expended ²	Funds Obligated ²	Revised '	Original				
								Activities
						Account No.	Categories	Name/PHA-Wide
Status of Work	ost	Total Actual Cost	l Estimated Cost	Total Estima	Quantity	Development	General Description of Major Work	Development Number
					ant No:	CFFF (Yes/ No): Yes Replacement Housing Factor Grant No:	CEFF (X Replacen	
	07 CFFP	Federal FFY of Grant: 2007 CFFP	Federal F		••	Grant Type and Number Capital Fund Program Grant No.		FHA Name: Livoma Housing Commission
			1					Part II: Supporting Fages
								D

Page3

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	flooring and kitchen appliances							
MI55-4	Renovation and upgrades to roofs,	1450 - \$30,000	9	60,000.00	60,000.00	25,340.00	25,000.00	under
	insulation, vinyl siding (9 homes); chain	1460 - \$30,000	roofs/gutters				-	construction
	link fences drives/sidewalk concrete,							
	sheds/garages							
MI 55-4	Renovation and upgrade of mechanical	1460	15	41,000.00	41,000.00 41,000.00 45,000.00		45,000.00	completed
	systems (furances), electrical service							
	panels/systems							
	Collaterization or Deb Service							
PHA Wide	Reserve Deposit	1501		26,344	26,344.57	26,344.57	26,344.57	completed
PHA Wide	Capitalized Interes	1501		8,604.00	8,911.04	8,911.04	8,911.04	completed
	Subtotal 1501			34,948	35,255.61	35,255.61	35,255.61	
	Contingency	1502		20,694.00	14,408.93	14,409.00	0	
	Grand Total			660,435	660,435	609,301.00	303.042.37	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

			Development Number Name/PHA-Wide Activities	PHA Name:	Part II: Supporting Pages
A TANKA TANK			General Description of Major Work Categories	Gra Cap CFH Rep	
			k Development Account No.	Grant Type and Number Capital Fund Program Grant No: CFFP (Yes/ No): Replacement Housing Factor Grant No:	
	-		Quantity	y: rant No:	
		Original	Total		
		Revised ¹	Estimated Cost	Federal	
The state of the s		Funds Funds Obligated ² Expended ²	Total Actual Cost	Federal FFY of Grant:	
			Status of Work	,	

 $^{^2\,\}mathrm{To}$ be completed for the Performance and Evaluation Report.

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¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

Part III: Implementation Schedule for Capital Fund Financing Program	edule for Capital Fund	Financing Program	THE PARTY OF THE P		The state of the s
PHA Name:			·		Federal FFY of Grant: 2007 CFFP
Development Number Name/PHA-Wide Activities	All Fund (Quarter F	All Fund Obligated (Quarter Ending Date)	All Fund (Quarter F	All Funds Expended (Quarter Ending Date)	Reasons for Revised Target Dates 1
	Original Obligation End	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	The state of the s
	Date				
MI 55-1	8/24/09	6/30/2009	8/24/2011		
MI 55-2	8/24/09	6/30/2009	8/24/2011		e e e e e e e e e e e e e e e e e e e
MI 55-4	8/24/2009	6/30/2009	8/24/2011	THE PARTY OF THE P	Translation to the state of the

² To be completed for the Performance and Evaluation Report.

PHA Wide 8/24/2009 6/30/2009 8/24/2001 4 90% obligated 90% obligated			 	 	 				
6/30/2009 90% obligated 91	-	PHA Wide							
6/30/2009 90% obligated 91		8/24/200							
8/24/2001									
		4/2001					:		

1 Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.